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ABSTRACT

Designed to enable special needs students to write resumes and complete application forms with employable accuracy, this set of activities on applying for a job is the fourth unit in a nine-unit secondary level careers course intended to provide handicapped students with the knowledge and tools necessary to succeed in the world of work. Chapter 1 contains a pretest, vocabulary list, and eleven activities which provide practice in filling out the various parts of an application form (with emphasis on references, educational background, personal health history, job training, and work experience). Practice in completing three personal data sheets is supplied in the second chapter, and students are required to complete five out of seven actual application forms in the third chapter. Following a discussion of two personal resumes, students are asked to write their own resume. A posttest concludes the unit. (The other eight course units which include activities on job search methods, job interviews, and keeping and changing jobs are available separately--see note.) (MN)

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CAREERS

(A Course of Study)

# UNIT IV

## APPLYING FOR THE JOB

CE026287

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UNIT IV: APPLYING FOR THE JOB

*Objective: Students will be able to relate to resume' writing and be able to complete application forms with employable accuracy.*

UNIT IV: APPLYING FOR THE JOB

CHAPTER I: Parts of The Application Form

Introduction

Pre-Test

Vocabulary

- Activity 1: Word and Meaning "Match-Up"
- Activity 2: How To Fill Out Application Forms
- Activity 3: Application Forms
- Activity 4: Watch Out For These...
- Activity 5: References
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- Activity 7: Reference Practice Sheet
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- Activity 10: Job Training
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Introduction

- Activity 1: Personal Data Sheet Number 1
- Activity 2: Personal Data Sheet Number 2
- Activity 3: Personal Data Sheet Number 3

CHAPTER 3: The Application Form

Introduction

- Activity 1: Application Form Practice
- Activity 2: Application Form Practice

Activity 3: Application Form Practice

Activity 4: Application Form Practice

Activity 5: Application Form Practice

Activity 6: Application Form Practice

Activity 7: Application Form Practice

CHAPTER 4: The Resume'

Introduction

Activity 1: Personal Resume' of Denise Temple

Activity 2: Personal Resume' of Susan Brown

Activity 3: Your Resume'

Post-Test

UNIT IV: APPLYING FOR THE JOB

*Objective: Students will be able to relate to resume' writing and be able to complete application forms with employable accuracy.*

UNIT IV
CHAPTER 1
Introduction

## PARTS OF THE APPLICATION FORM

This first chapter will teach you to fill out an application form the right way. You will learn the different steps to filling out your application form. When you are finished with this chapter you will be able to fill out an application without help. The application form is the first thing the employer will see of you so let's learn it right.

UNIT IV
Pre-TEST

| POSITION APPLIED FOR | | | | DATE | |
|---|---|---|---|---|---|
| NAME IN FULL MR. MRS. MISS | LAST | FIRST | MIDDLE | MAIDEN NAME | SOC. SEC. NO. |
| NUMBER AND STREET | CITY | | STATE | ZIP | TELEPHONE NO. |
| MARITAL STATUS ☐ SINGLE ☐ MARRIED ☐ SEPARATED ☐ WIDOWED ☐ DIVORCED | | DATE OF BIRTH MO. DAY YR. | | | PLACE OF BIRTH |
| IN CASE OF EMERGENCY NOTIFY | NAME | | | | RELATIONSHIP |
| | ADDRESS | | | | TELEPHONE NO. |
| HEIGHT | WEIGHT | WEAR GLASSES ☐ YES ☐ NO | HANDED ☐ LEFT ☐ RIGHT | ANY PHYSICAL DEFECTS ☐ YES ☐ NO | EXPLAIN |

## EDUCATION

| TYPE OF SCHOOL | NAME AND ADDRESS | YRS. ATTENDED | YEAR LEFT | GRADUATED | COURSE OR MAJOR |
|---|---|---|---|---|---|
| GRAMMAR OR GRADE | | | | | |
| HIGH SCHOOL | | | | | |
| COLLEGE | | | | | |
| BUSINESS OR TRADE | | | | | |

## MILITARY EXPERIENCE

| BRANCH OF SERVICE | DISCHARGE DATE AND RANK | DRAFT CLASSIFICATION | TYPE OF DISCHARGE |
|---|---|---|---|
| | | | |

## SKILLS

| WHAT KIND OF WORK CAN YOU DO | TYPING SPEED |
|---|---|
| WHAT MACHINES CAN YOU OPERATE | SHORTHAND SPEED |

## PRIOR WORK HISTORY

LIST IN ORDER, LAST OR PRESENT EMPLOYER FIRST — MAY WE CALL YOUR PRESENT EMPLOYER ☐ YES ☐ NO

| DATES FROM | TO | EMPLOYER | RATE OF PAY START | RATE OF PAY FINISH | JOB TITLE AND SUPERVISOR'S NAME | REASON FOR LEAVING |
|---|---|---|---|---|---|---|
| | | NAME | | | | |
| | | ADDRESS | | | | |
| | | NAME | | | | |
| | | ADDRESS | | | | |

## REFERENCES (Other than Relatives or Former Employers)

| | NAME | ADDRESS | OCCUPATION |
|---|---|---|---|
| 1. | | | |
| 2. | | | |

IT IS AGREED AND UNDERSTOOD THAT ANY FALSE STATEMENTS ON THIS APPLICATION MAY BE CONSIDERED SUFFICIENT CAUSE FOR DISMISSAL, WHEN DISCOVERED.

SIGNATURE_____

## WORDS YOU SHOULD KNOW

To fill out application forms you will have to learn special words. Below is a list of those words and their meanings. Get to know them:

address - where you live

age - how old you are

application - the form you fill out when you ask for a job

business - businesses

leave blank - don't put anything in the space

education - how long you have gone to school and where

emergency - if something happens - like an accident on the job

experience - what you have done before

former employer - who you have worked for

height - how tall you are

hobbies - what you like to do with your free time

interview - a meeting with the person who does the hiring

maiden name - the name the girl had before she was married

part-time - less than 40 hours a week

physical defects or disabilities - any problems you have with your body

previous - before

print - not writing

reference - someone who knows you well

sex - male or female

signature - signing your name

marital status - married, single, widowed, separated, divorced

spouse - husband or wife

dependents - any children you have or people you support

applicants signature - signing your name at the end of the application

military status - have you been in the army, navy, or air force

salary - money you will be earning

permanent address - where you live all the time

limitations - things you can't do

work experience - jobs you have had before

UNIT IV
CHAPTER 1
Activity 1

## WORD AND MEANING "MATCH-UP"

Now that you have learned the special words, it is time to check you on them. Match the words with their meanings. The first one has been done for you.

| | |
|---|---|
| height | any problems you have with your body |
| hobbies | male or female |
| maiden name | any children you have or people you support |
| physical defects or disabilities | how tall you are |
| previous | married, single, widowed, separated, divorced |
| reference | signing your name |
| sex | things you do in your extra time |
| marital status | someone who knows you well |
| spouse | husband or wife |
| dependents | before |
| signature | the name a girl has before she gets married |

UNIT IV
CHAPTER 1
Activity 2

## HOW TO FILL OUT APPLICATION FORMS

After you have decided what kind of job you are looking for, you are ready to apply for some of these jobs. You will be filling out forms for employers who are looking for the best person to fill the job. Their choice is much like what you do when you look for a car to buy. Before buying a car, you want to know something about how it runs, how it looks, and how much it costs. The employer who interviews you will want to know:

1. Some facts about you, like how much schooling you have and also if you have any experience for the job.
2. How you look and act.
3. What you can do.

For the employer to find this out you will have to fill out an application form. It also means that you must be interviewed before you will be hired. Sometimes you may be asked to take some kind of tests. If you are looking for a job as secretary, you will be given shorthand and typing tests. If you are looking for a job as a welder, you will be asked to do some welding to show how well you do. If you show the employer your good skills, you have a much better chance of being hired!

## APPLICATION FORMS

Employers will ask you to fill out an application form, doing these things will help sell you to the employer:

1. Fill out the application form in ink - or use a typewriter.

2. Answer every question that "applies" to you (if a question does not apply, you may write "NA", which means not applicable, (doesn't apply to you) or draw a line through the space to show that you did not miss that question).

3. Give your full address, and your zip code.

4. Questions on marital status ask if you are "single", "married", "separated", "divorced", or "widowed".

5. Spell words right. (If you can't spell it right use the dictionary or use another word which means about the same thing.) Or ask if you can take the application home, so that you can get some help.

6. The question on "place of birth", is asking what city and what state you were born in - not the name of the hospital.

7. A question on "job preference" or "job for which you are applying" should be answered with one job title or type of work. Do not write "anything" - employers expect you to state clearly what kind of work you can do.

8. Have with you the names and addresses of all schools you went to. Also have the dates you went to that school. If you can't remember all of them, write them down.

9. Make sure you have at least three good references. Good references are (a) the paster of your church, (b) a former employer, (c) a teacher who knows you well, (d) friends who are already in business. (not friends in school or family and relatives).

10. When you write or sign your name on the application, use your correct name - not a "nickname." Your first name, middle initial, and last name is the best.

11. Be as neat as possible (the employer thinks that your application is an example of your best work.)

On the next few pages the application form is broken down into many steps for you to practice. After completing those you will be ready to try a whole application form.

## WATCH OUT FOR THESE...

Listed below are things that could give you problems on application forms. Look out for the directions on how to fill in the blank correctly.

1. This means last name first. _____
   (Last) (First) (Middle)

2. This means both name and address. YOUR NAME AND ADDRESS

   _____

   _____

3. This does not mean a past employer or a relative. It means people you have known for a long time (not school buddies).

   LIST TWO PERSONAL REFERENCES:

   _____

   _____

4. Notice if the blank is in front or in back of the question. The blank is <u>following</u> the number.

   CHECK THE NUMBER OF PEOPLE DEPENDING ON YOUR INCOME:

   _____1 _____2 _____3 _____4 _____4 or more

## WATCH OUT FOR THESE..!

Listed below are things that could give you problems on application forms. Look out for the directions on how to fill in the blank correctly.

1. This means last name first. _____
   (Last) (First) (Middle)

2. This means both name and address. YOUR NAME AND ADDRESS
   _____
   _____

3. This does not mean a past employer or a relative. It means people you have known for a long time (not school buddies).
   LIST TWO PERSONAL REFERENCES:
   _____
   _____

4. Notice if the blank is in front or in back of the question. The blank is <u>following</u> the number.
   CHECK THE NUMBER OF PEOPLE DEPENDING ON YOUR INCOME:
   _____1 _____2 _____3 _____4 _____4 or more

5. Check "Yes" or "No" and explain if "Yes"

   WERE YOU ABSENT MORE THAN 5 DAYS LAST YEAR?

   Yes_____ No_____

   If Yes, explain_____

6. Be sure to give your telephone number, Tel. No. means your own number.

   Tel. No.

   _____

## REFERENCES

Employers almost always ask for references on their job application forms. By this, they mean the names of people they can ask about your ability, how you act, and your background. These references must be people who know you. And they should be people who will say good things about you. For references, it is better to give names of people who are not in your family. An employer likes it much better that way. Your high school counselor, teachers, your church leader, neighbors, youth group leaders, and other such people are good personal references.

You should always ask first if you can give their name as references. They may not want strangers to know where they live or work. And if you get their permission, be sure to tell them when you have used their names. Then they will not be surprised when they get a telephone call or a letter from an employer.

Be prepared with the names, addresses, and telephone numbers of your references. The employer should be able to contact them easily. Unless you are asked for their work addresses and telephones, give their home addresses and telephone numbers only. Then ask your references for permission to use business addresses and telephones before you give them out.

## GETTING REFERENCES

These are some people you can ask to be references:

1. Former employers
2. Teachers
3. My principal
4. My minister
5. My family doctor
6. My family dentist
7. My neighbors

Fill in the names and addresses of five persons that you could use as references:

1. _____
   Name Address

2. _____
   Name Address

3. _____
   Name Address

4. _____
   Name Address

5. _____
   Name Address

## REFERENCE PRACTICE SHEET

A lot of times employers ask for more than just the names of the references. Below are the kinds of questions they might ask about your references. Practice filling out the forms below.

---

1. Name_____

   Address_____
   Number Street Apt.

   _____
   City State Zip Code

   Telephone_____
   (Area Code) Number

   Teacher_____ Former Employer_____ Friend_____ Relative_____

   Other_____

   How long has this person known you?_____

---

1. Name_____

Address_____
Number Street Apt.

_____
City State Zip Code

Telephone_____
(Area Code) Number

Teacher_____ Former Employer_____ Friend_____ Relative_____

Other_____

How long has this person known you?_____

1. Name_____

Address_____
Number Street Apt.

_____
City State Zip Code

Telephone_____
(Area Code) Number

Teacher_____ Former Employer_____Friend_____Relative_____

Other_____

How long has this person known you?_____

## EDUCATIONAL BACKGROUND

Another section on application forms that you need to learn to fill out is the part called Educational Background. Here the employer wants to know all the schools you have gone to and the dates you were there and where the schools are. Fill these out as good as you can.

| SCHOOL | LOCATION | DATES ATTENDED | GRADES | | |
|---|---|---|---|---|---|
| | | | POOR | AVG. | GOOD |
| Elementary: | | From: | | | |
| Name | City | To: | | | |
| | State | From: | | | |
| Name | City | To: | | | |
| | State | | | | |
| Junior High: | | From: | | | |
| Name | City | To: | | | |
| | State | From: | | | |
| Name | City | To: | | | |
| | State | | | | |
| High School: | | From: | | | |
| Name | City | To: | | | |
| | State | From: | | | |
| Name | City | To: | | | |
| State | | | | | |

High School Attendance Record: _____

Date of Graduation: _____

# PERSONAL HEALTH HISTORY

The employer is going to want to know about your health. Below are questions he might ask. As always, on employment forms, be neat and honest as you fill them out.

**List any Childhood Illnesses and Diseases:**

_____

_____

_____

_____

**List any Serious Accidents or Injuries:**

_____

**Allergies:**

_____

**Physical Disabilities:**

_____

**Physician:**

Name _____

Address _____
Number Street

_____
City State

Telephone _____
(Area Code) Number

**Days of school missed the past year due to illness:** _____

**Do you wear glasses? Yes _____; No _____.**

**In case of emergency, notify:**

Name _____ Name _____

Address _____ Address _____
Number Street Number Street

_____ _____
City State City State

Relationship: _____ Relationship: _____

UNIT IV
CHAPTER 1
Activity 10

## JOB TRAINING

Employers want to know what kind of job training you have had. This will tell them if you have the skills of the talent to do the job. Think back to all you have done when you fill out this form. Things like babysitting and mowing lawns count. If you have not had any job training just read over the worksheet carefully. Do the "SPECIAL INTEREST AND ABILITIES" section

| TYPE OF WORK | COMPANY/LOCATION | LENGTH OF TIME | PERFORMANCE | | | |
|---|---|---|---|---|---|---|
| | | | Excellent | Good | Satisfactory | Unsatisfactory |
| | Name: | From: | | | | |
| | | To: | | | | |
| | Number Street | | | | | |
| | City State | | | | | |
| | Name: | From: | | | | |
| | | To: | | | | |
| | Number Street | | | | | |
| | City State | | | | | |

## SPECIAL INTERESTS AND ABILITIES

Clubs _____

Hobbies _____

Sports _____

Other _____

SPECIAL OR OUTSTANDING SKILLS:

1. _____ 3. _____

2. _____ 4. _____

What do you feel you can do well? _____

_____

What do you feel you cannot do so well? _____

_____

UNIT IV
CHAPTER 1
Activity 11

WORK EXPERIENCE: Last Two Employers Only

Employers will always ask about the places you worked before. You must be ready to give them the right information. Get all that information, then practice putting all the information down on this paper.

If you have never had a job, then just read over the sheet carefully.

1. Employer:

Name _____

Address _____
Number Street

_____
City State

Telephone _____
(Area Code) Number

Supervisor _____

Job Title _____

Description of Duties: _____

_____

_____

Length of Employment: From: _____ To: _____
Month Year Month Year

Reason for Leaving: _____

_____

2. Employer:

Name _____

Address _____
Number Street

_____
City State

Telephone _____
(Area Code) Number

Supervisor _____

Job Title _____

Description of Duties: _____

_____

Length of Employment: From: _____ To: _____
Month Year Month Year

Reason for Leaving: _____

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# THE PERSONAL DATA SHEET

## CHAPTER 2

## PERSONAL DATA SHEETS

We have gone over a lot of information about the application form. With all this information it would be hard to remember it all when you go looking for a job. One way to solve this problem is to carry with you a Personal Data Sheet. This will give you all the information you need to fill out the application right. After you have finished filling out your personal data sheet, take it with you whenever you go looking for a job.

Following this page are 3 different kinds of personal data sheets. Some are harder than others and contain more information. Practice on these forms until you have all the information correct and looking neat and orderly. Then pick one to use when you go looking for a job.

DON'T FORGET!! This kind of thing can sometimes get boring, so you have to remember why you are doing these activities. Someday soon you will have to earn a living and this is getting you prepared to go out and get that job that will give the money you need to have a good life.

# PERSONAL DATA SHEET NUMBER 1

Name: _____

Address: _____ Telephone No: _____

Age: _____ Height: _____ Weight: _____

Marital Status: _____

Education:

FROM TO

Grade School and Address: _____

High School and Address: _____

Other: _____

Last Grade Completed: _____

Courses Completed: _____

Jobs (give the most recent jobs first):

EMPLOYER ADDRESS POSITION FROM TO

_____

_____

_____

Hobbies:

References (give two or more--do not use relatives):

Name and address: _____

Position _____

Name and Address: _____

Position _____

UNIT IV
CHAPTER 2
Activity 2

# PERSONAL DATA SHEET NUMBER 2

Name _____
Last First Middle

Father's Name _____

Mother's Name _____

Mother's Maiden Name _____

Address _____
Number Street

_____
City State

Number of _____ Brothers _____ Sisters

Names of your brothers and sisters.

| Brothers | Sisters |
|---|---|
| | |
| | |
| | |
| | |

Birthdate _____

Weight _____ Height _____

Have you had any serious illness? _____

If so, what? _____

_____

# PERSONAL DATA SHEET NUMBER 3

## FAMILY INFORMATION

NAME _____ AGE _____ DATE OF BIRTH _____

ADDRESS _____
(STREET) (CITY) (STATE) (ZIP)

SPOUSE _____ AGE _____ DATE OF BIRTH _____
(HUSBAND OR WIFE)

NO. OF DEPENDENT CHILDREN _____ AGES _____ TOTAL NUMBER OF DEPENDENTS (YOU, YOUR CHILDREN, AND OTHER FAMILY MEMBERS YOU SUPPORT) _____

## SOCIAL SECURITY NO. TELEPHONE NO. DRIVER'S LICENSE NO.

_____ _____ _____

## MILITARY SERVICE

BRANCH _____

DATES _____

RANK _____

## LABOR UNION MEMBERSHIP

LOCAL NO. _____

CARD NO. _____

## REFERENCES (NOT PAST EMPLOYERS OR RELATIVES)

| | NAME | ADDRESS | PHONE |
|---|---|---|---|
| 1. | _____ | _____ | _____ |
| 2. | _____ | _____ | _____ |
| 3. | _____ | _____ | _____ |

## RECORD OF PAST EMPLOYMENT

| NAME AND ADDRESS OF EMPLOYER | FROM (MO/YR) | TO (MO/YR) |
|---|---|---|
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |

| DESCRIPTION OF JOB AND POSITION HELD | SUPERVISOR | PAY |
|---|---|---|
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |

## EDUCATION INFORMATION

| NAME OF SCHOOL AND ADDRESS | FROM (MO/YR) | TO (MO/YR) |
|---|---|---|
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |

UNIT IV

# THE APPLICATION FORM

## CHAPTER 3

## THE WHOLE APPLICATION FORM

Now that you have practiced all the different sections of the application form it is now time to fill out a whole form. You will have many forms to practice on, some will be harder than others. The first application form you can do as a class (an overhead is provided).

You must remember that the application form you fill out may be the first thing that employers see of you, so make it talk for you, not against you. Also use your personal data sheet in filling these application forms. This will help you get all the information down correctly.

Choose at least 5 of these to fill out. Yes, it isn't a lot of fun, but we have to practice so we get good at it.

UNIT IV
CHAPTER 3
Activity 1

# -JOB APPLICATION

SCOPE VISUALS-GETTING APPLICATIONS RIGHT

| POSITION APPLIED FOR | | | | DATE | |
|---|---|---|---|---|---|
| NAME IN FULL (MR. MRS. MISS) | LAST | FIRST | MIDDLE | MAIDEN NAME | SOC. SEC. NO. |
| NUMBER AND STREET | CITY | STATE | ZIP | TELEPHONE NO. | |
| MARITAL STATUS ☐ SINGLE ☐ MARRIED ☐ SEPARATED ☐ WIDOWED ☐ DIVORCED | DATE OF BIRTH MO. DAY YR. | PLACE OF BIRTH | | | |
| IN CASE OF EMERGENCY NOTIFY | NAME | RELATIONSHIP | | | |
| | ADDRESS | TELEPHONE NO. | | | |
| HEIGHT WEIGHT | WEAR GLASSES ☐ YES ☐ NO | HANDED ☐ LEFT ☐ RIGHT | ANY PHYSICAL DEFECTS ☐ YES ☐ NO | EXPLAIN | |

## EDUCATION

| TYPE OF SCHOOL | NAME AND ADDRESS | YRS. ATTENDED | YEAR LEFT | GRADUATED | COURSE OR MAJOR |
|---|---|---|---|---|---|
| GRAMMAR OR GRADE | | | | | |
| HIGH SCHOOL | | | | | |
| COLLEGE | | | | | |
| BUSINESS OR TRADE | | | | | |

## MILITARY EXPERIENCE

| BRANCH OF SERVICE | DISCHARGE DATE AND RANK | DRAFT CLASSIFICATION | TYPE OF DISCHARGE |
|---|---|---|---|
| | | | |

## SKILLS

| WHAT KIND OF WORK CAN YOU DO | TYPING SPEED |
|---|---|
| WHAT MACHINES CAN YOU OPERATE | SHORTHAND SPEED |

## PRIOR WORK HISTORY

LIST IN ORDER, LAST OR PRESENT EMPLOYER FIRST — MAY WE CALL YOUR PRESENT EMPLOYER ☐ YES ☐ NO

| DATES FROM | DATES TO | EMPLOYER | RATE OF PAY START | RATE OF PAY FINISH | JOB TITLE AND SUPERVISOR'S NAME | REASON FOR LEAVING |
|---|---|---|---|---|---|---|
| | | NAME / ADDRESS | | | | |
| | | NAME / ADDRESS | | | | |

## REFERENCES (Other than Relatives or Former Employers)

| | NAME | ADDRESS | OCCUPATION |
|---|---|---|---|
| 1. | | | |
| 2. | | | |

IT IS AGREED AND UNDERSTOOD THAT ANY FALSE STATEMENTS ON THIS APPLICATION MAY BE CONSIDERED SUFFICIENT CAUSE FOR DISMISSAL, WHEN DISCOVERED.

SIGNATURE_____

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## EMPLOYMENT APPLICATION

PERSONAL INFORMATION: Date Social Security No.

Name Age Sex

Last First Middle

Present Address

Street City State

Permanent Address

Street City State

Phone No. Own Home Rent Board

Date of Birth Height Weight

Color of Hair Color of Eyes

Married Single Widowed Divorced Separated

Number of children Dependents other than wife or children Citizen of U.S.A.? Yes ☐ No ☐

If related to anyone in our employ, state name and department

Referred by

EMPLOYMENT DESIRED: Position Date you can start Salary desired

Are you employed now? If so, may we inquire of your present employer?

Ever applied to this company before? Where? When?

| EDUCATION: | Name and Location of School | Years Attended | Date Graduated | Certificate |
|---|---|---|---|---|
| Grammar School | | | | |
| High School | | | | |
| College | | | | |
| Trade, Business, or Correspondence School | | | | |

What foreign languages do you speak fluently? Read? Write?

U.S. Military or Naval Service Rank

Present membership in National Guard or Reserves

# McDONALD'S®

## APPLICATION FOR EMPLOYMENT

### PERSONAL INFORMATION

DATE _____ SOCIAL SECURITY NUMBER _____

NAME _____ (LAST / FIRST / MIDDLE) AGE _____

PRESENT ADDRESS _____ (NO. & STREET / CITY / STATE) HOW LONG THERE? _____

PREVIOUS ADDRESS _____ (NO. & STREET / CITY / STATE) HOW LONG THERE? _____

PHONE NO. _____ OWN HOME _____ RENT _____ BOARD _____ DATE OF BIRTH _____ HEIGHT _____

WEIGHT _____ MARRIED _____ SINGLE _____ WIDOWED _____ DIVORCED _____ SEPARATED _____ CITIZEN OF U. S. A.? _____

NO. OF CHILDREN _____ DEPENDENTS OTHER THAN WIFE OR CHILDREN _____ REFERRED BY _____

### EDUCATION

NAME AND ADDRESS OF LAST SCHOOL ATTENDED _____ DATES _____

CIRCLE LAST YEAR COMPLETED — GRADE 5 6 7 8 HIGH SCHOOL 1 2 3 4 OTHER 1 2 3 4

SPECIAL TRAINING AND SKILLS _____

### MILITARY

BRANCH _____ FROM _____ TO _____ RANK _____ TYPE DISCHARGE _____ DRAFT CLASS _____

### FORMER EMPLOYERS

LIST BELOW LAST FOUR EMPLOYERS, STARTING WITH LAST ONE FIRST.

| DATE MONTH AND YEAR | NAME AND ADDRESS OF EMPLOYER | SALARY | POSITION | REASON FOR LEAVING |
|---|---|---|---|---|
| FROM<br>TO | | | | |
| FROM<br>TO | | | | |
| FROM<br>TO | | | | |
| FROM<br>TO | | | | |

EVER DISCHARGED FROM A JOB? _____ MAY WE CALL PRESENT EMPLOYER? _____ EVER BONDED? _____

EVER REFUSED BOND? _____ EVER APPLY OR WORK AT McDONALD'S® BEFORE? _____ WHERE? _____ WHEN? _____

EVER ARRESTED? _____ IF SO, PLEASE EXPLAIN _____

DO YOU HAVE ANY OVERDUE BILLS? _____ IF SO, PLEASE EXPLAIN _____

### PHYSICAL RECORD

HAVE YOU ANY DEFECTS IN HEARING? _____ IN VISION? _____ IN SPEECH? _____

ANY OTHER PHYSICAL DEFECTS? _____

WERE YOU EVER INJURED? _____ GIVE DETAILS _____

IN CASE OF EMERGENCY NOTIFY _____ (NAME / ADDRESS / PHONE NO.)

UNIT IV
CHAPTER 3
Activity 3 (Continued)

**REFERENCES** GIVE BELOW THE NAMES OF THREE PERSONS, EXCLUDING RELATIVES AND FORMER EMPLOYERS, WHOM YOU HAVE KNOWN AT LEAST ONE YEAR.

| | NAME | ADDRESS | BUSINESS | YEARS ACQUAINTED |
|---|---|---|---|---|
| 1 | | | | |
| 2 | | | | |
| 3 | | | | |

**APPLICANT'S AVAILABILITY**

PART TIME ☐ FULL TIME ☐

| | MON. | TUES. | WED. | THURS. | FRI. | SAT. | SUN. |
|---|---|---|---|---|---|---|---|
| DAY | | | | | | | |
| NITE | | | | | | | |

HOURS ON OTHER JOB (IF APPLICABLE) _____

AS A CONDITION OF MY APPLICATION AND/OR EMPLOYMENT, I AUTHORIZE INVESTIGATION OF ALL STATEMENTS CONTAINED IN THIS APPLICATION. I UNDERSTAND THAT MISREPRESENTATION OR OMISSION OF FACTS CALLED FOR IS JUST CAUSE FOR DISMISSAL. IF HIRED, I AGREE TO FOLLOW THE RULES AND REGULATIONS OF HEALTH AND LEGAL AUTHORITIES AND SUCH RULES AND REGULATIONS THAT McDONALD'S SYSTEM, INC., OR ANY OF ITS LICENSEES MAY FROM TIME TO TIME PRESCRIBE, INCLUDING, IF NOT PROHIBITED BY LAW, LIE DETECTOR TESTS. MY REFUSAL TO COOPERATE WILL BE JUST CAUSE FOR DISMISSAL.

DATE _____ SIGNATURE _____

DO NOT WRITE BELOW THIS LINE

**EMPLOYEE RECORD**

NEW HIRE ☐ REHIRE ☐ WILL REPORT _____ HIRED BY _____ (SIGNATURE—POSITION)

IF REHIRE, GIVE DATE OF LAST TERMINATION _____

REMARKS _____

| RATE CHANGES DATE | NEW RATE |
|---|---|
| | $ |
| | |
| | |
| | |
| | |
| | |

**TERMINATION**

DATE _____ QUIT ☐ REASON: MIL. TRANSFER ☐ FAMILY RELOCATION ☐ DISSAT. ☐ RETURN SCHOOL ☐ OTHER ☐

**PERFORMANCE SUMMARY**

| | EXC. | GOOD | FAIR | POOR |
|---|---|---|---|---|
| ATTENDANCE | | | | |
| COMPATABILITY | | | | |
| QUALITY OF WORK | | | | |
| HONESTY | | | | |
| INITIATIVE | | | | |
| APPEARANCE | | | | |

ADEQUATE NOTICE GIVEN? YES ☐ NO ☐

DISCHARGED ☐ ELIGIBLE FOR REHIRE? YES ☐ NO ☐

LEAVE OF ABSENCE ☐ LAYOFF ☐ (CONSIDER REHIRE ON RETURN FROM LEAVE OR LAYOFF)

REMARKS (EXPLAIN TERMINATION FULLY) _____

_____ (SIGNATURE—POSITION)

BIG BOY SUPER MARKETS, INC.

APPLICATION FOR EMPLOYMENT

PERSONAL INFORMATION

Date _____ Social Security Number _____

Name _____ Age _____ Sex _____
Last First Middle

Present Address _____
Street City State

Permanent Address _____
Street City State

Phone No. _____ Own Home _____ Rent _____ Board _____

Date of Birth _____ Height _____ Weight _____ Color of Hair _____ Color of Eyes _____

Married _____ Single _____ Widowed _____ Divorced _____ Separated _____

No. of Children _____ Dependents other than Wife or Children _____ Citizen of U. S. A. _____ Yes _____ No _____

If Related to anyone in our Employ - State name and Department _____ Referred By _____

EMPLOYMENT DESIRED

Position _____ Date you can start _____ Salary Desired _____

Are you Employed now? _____ If so may we inquire of your Present Employer _____

Ever applied to this company before? _____ Where _____ When _____

| EDUCATION | Name and Location of School | Years Attended | Date Grad. | Subjects Studied |
|---|---|---|---|---|
| Grammar School | | | | |
| High School | | | | |
| College | | | | |
| Trade, Business or Correspondence School | | | | |

FORMER EMPLOYERS (List below last four employers. Starting with Last One first)

| Date - Month and Year | Name and Address of Employer | Salary | Position | Reason for Leaving |
|---|---|---|---|---|
| From<br>To | | | | |
| From<br>To | | | | |
| From<br>To | | | | |
| From<br>To | | | | |

REFERENCES: Give below the names of three Persons not related to you, Whom you have known at least one year.

| Name | Address | Business | Years Acquainted |
|---|---|---|---|
| 1 | | | |
| 2 | | | |
| 3 | | | |

PHYSICAL RECORD:
List any Physical Defects _____
Were You Ever Injured? _____ Give Details _____
Have you any Defects in Hearing? _____ In Vision? _____ In Speech? _____
In Case of
Emergency Notify _____
Name Address Phone No.

I Authorize investigation of all statements contained in this application. I understand that misrepresentation or omission of facts called for is cause for dismissal. Further, I understand and agree that my employment is for no definite period and may, regardless of the date of payment of my wages and salary, be terminated at any time without any previous notice.

Date _____ Signature _____

DO NOT WRITE BELOW THIS LINE

Interviewed by _____ Date _____
REMARKS: _____

Neatness _____ Character _____
Personality _____ Ability _____
Hired ____ For Dept. ____ Position ____ Will Report ____ Salary-Wages ____
Approved: 1. _____ 2. _____ 3. _____
Employment Manager Dept. Head General Manager

Please Print — Caution: Furnishing False or Incomplete Information is sufficient cause for Discharge.

**R. J. Smith Dept. Store Application for Employment**

| Were you ever Employed by this Store or any of its branches: Yes No | If Yes state in what Year | In What Branch |
|---|---|---|

| Your Last Name | First | Middle |
|---|---|---|

| No. and Street | Boro. | Zone | City | State |
|---|---|---|---|---|
| | | | | |
| | | | | |
| | | | | |

Lock No.

| The Law against Discrimination Prohibits Discrimination because of Age. | Date of Birth Mo. | Day | Year | Male Female | Social Security No. | Phone # |
|---|---|---|---|---|---|---|
| | | | | | | |

| Are You Single Married | Separated Divorced | Widowed | No. of Children | Number of Addtl. Dependents |
|---|---|---|---|---|
| | | | | |

If you live with parents state first name of Father Mother

| Maiden Name | Name of Husband or wife | His or Her Type of Business | His or Her Position |
|---|---|---|---|
| | | | |

If You Live with Relations State Full Name Relationship

If you Board State with Whom Full Name

Educational Record

| | Name of School | Address | Date Last Attended | No. Yrs. Attended | Grad. Yes or No | Degree |
|---|---|---|---|---|---|---|
| Elementary (day) | | | | | | |
| High School (day) | | | | | | |
| College (day) | | | | | | |
| Other Schools (day) | | | | | | |
| Evening School | | | | | | |

PREVIOUS EMPLOYMENT — Enter the Names of all the Firms you worked for in the last Five Years. Begin with the Last.

| Employed By | Address | Worked Dates From | to | Kind of Business | Position | Salary | Reason for Leaving |
|---|---|---|---|---|---|---|---|
| | | | | | | | |
| | | | | | | | |

PERSONAL REFERENCES — Name Three Persons who know you, and who are in a profession or who own their own business. Do not name former Employers or Relatives.

| Name | Address | Business or Profession |
|---|---|---|
| Name | Address | Business or Profession |
| Name | Address | Business or Profession |

List the names of your friends and relatives working for this store

| Name | State Friend or Relationship | Name | State Friend or Relationship |
|---|---|---|---|
| | | | |
| | | | |

UNIT IV
CHAPTER 3
Activity 5

# FULLERTON UNION HIGH SCHOOL DISTRICT

AN EQUAL OPPORTUNITY EMPLOYER

211 WEST COMMONWEALTH AVENUE
FULLERTON, CALIFORNIA 92632
(714) 879-4451

In order that your application may be properly evaluated it is essential that all of the following questions be answered carefully and completely.

Date _____

| Name ( Please Print ) Last | First | Middle | Area Code | Phone No. | Social Security Number |
|---|---|---|---|---|---|
| | | | | | |

Address ( No. Street, City, State and Zip Code ) | Date of Birth ( Mo. Day Year )

In case of emergency notify: ( Name, address, phone & relationship )

| Have you ever worked or applied for work with FUHS District? ☐ Yes ☐ No Where _____ When _____ | Have you any relatives employed by FUHS District? ☐ Yes ☐ No. | How were you referred to FUHS District? |
|---|---|---|

| Position Desired | Salary Expected | When could you start? | Can you work overtime? ☐ Yes ☐ No. | Can you work at any location in the District? ☐ Yes ☐ No |
|---|---|---|---|---|
| | | | | |

| Are you interested in part-time employment? ☐ Yes ☐ No | U. S. Citizen ☐ Yes ☐ No | Marital Status | No. of Dependents | Ages of children, if any |
|---|---|---|---|---|
| | | | | |

Have you ever been arrested, detained or fingerprinted by police, either as a juvenile or an adult, for any offense? ☐ Yes ☐ No — If yes, state offense, date, location — Convicted? ☐ Yes ☐ No

Are you now or have you ever been a member of any party organization, political or otherwise that now or has advocated the overthrow of the government of the United States, or the State of California by force or unlawful means? ☐ Yes ☐ No

If yes list party or organization _____

| MILITARY | Have you served in the U.S. Armed Forces? ☐ Yes ☐ No From _____ To _____ | Branch of Service | Type of Discharge | Present Draft Classification |
|---|---|---|---|---|
| | | | | |

Are you a member of the National Guard or any reserve unit? ☐ Yes ☐ No Date obligation completed _____

**MEDICAL**

Are you now under doctors care? ☐ Yes ☐ No

Have you consulted a doctor or been hospitalized - past two years? ☐ Yes ☐ No
If yes, explain _____

How many days have you missed in the past two years due to illness? _____

Have you ever had any of the following? ( Write yes or no)

| Back Injury | Hernia | Tuberculosis | Diabetes | Heart Trouble | Asthma | Sinus | High Blood Pressure |
|---|---|---|---|---|---|---|---|
| | | | | | | | |

| Ulcers | Skin Rash | Allergy | Cancer | Arthritis | Rheumatic Fever | Color Blindness | Epilepsy | Convulsions |
|---|---|---|---|---|---|---|---|---|
| | | | | | | | | |

Have you ever had a Workman's Compensation Claim? ☐ Yes ☐ No When? _____ Where? _____

**CLERICAL**

Can you type? ☐ Yes ☐ No. WPM _____

Take dictation ☐ Yes ☐ No. WPM _____

List office machines you have operated

| EDUCATION | Name of school and location (city) | Course of Study | Dates From — To | Highest Grade Completed | Did you Graduate? | Degree |
|---|---|---|---|---|---|---|
| Elementary | | | | | | |
| High School | | | | | | |
| Community College | | | | | | |
| College or University | | | | | | |
| Other | | | | | | |

## EMPLOYMENT RECORD

( Please account for all your time since leaving high school, including all time spent in military service. ) If more space is required, use separate sheet of paper, start with your present position and work back to the first position, and account for ALL periods of unemployment.

| | LAST OR PRESENT JOB | 2 | 3 | 4 |
|---|---|---|---|---|
| COMPANY NAME | | | | |
| ADDRESS | | | | |
| CITY & STATE | | | | |
| SUPERVISOR | | | | |
| Dates of Employment | From: / / To: / / | From: / / To: / / | From: / / To: / / | From / / To: / / |
| JOB TITLE | | | | |
| SALARY (per month) | | | | |
| TYPICAL JOB DUTIES | | TYPICAL JOB DUTIES | TYPICAL JOB DUTIES | TYPICAL JOB DUTIES |
| | | | | |
| | | | | |
| | | | | |
| Why did you leave? (or, why are you leaving? ) | | Why did you leave? | Why did you leave? | Why did you leave? |
| | | | | |
| | | | | |
| | | | | |

MAY WE CONTACT YOUR PRESENT EMPLOYER BEFORE YOUR CURRENT EMPLOYMENT ENDS? ☐ Yes ☐ No

### AGREEMENT

In exchange for consideration of me for employment by the Fullerton Union High School District, I agree that my employers, except as I may have indicated above, may exchange information regarding my qualifications without incurring any liability. I also understand that I may be requested to have a physical examination by a doctor(s) selected by Fullerton Union High School District, and I agree that the findings of the examination may be given to the Fullerton Union High School District.

I CERTIFY THAT THE INFORMATION ON THIS APPLICATION IS TRUE AND IT IS UNDERSTOOD THAT ANY MISREPRESENTATION OF FACTS SHALL BE JUSTIFICATION FOR DENIAL OF EMPLOYMENT OR DISMISSAL.

SIGNATURE _____ DATE _____

### FOR PERSONNEL DEPARTMENT USE ONLY:

Position _____

Hours _____ Shift _____

Permanent ☐ Temporary ☐ Part - time ☐

Supervisor _____

Location _____ Range _____ Step _____

Base Salary _____ Total Salary _____

Percent employed _____ Premium Pay Percent _____

First Day Worked _____ Premium Pay Amount _____

First Name of Spouse _____

Chevron

SAMPLE COPY

# Employment Application

Please first read the Applicant Statement on the reverse side. Then, fill out the application in your own handwriting or printing. Be accurate and complete. Information you give will not be used for purposes prohibited by law.

Date

Name (First) (Middle) (Last)

Type of Work Desired

Maiden Name (Last) | Former Married Name(s) (Last) | Social Security No.

Address (No. & Street) (City) (State) (Zip) | How long? | Phone

| Birth Date | Are you a U.S. citizen? ☐ Yes ☐ No | If "No," Type Visa Held | Male ☐ | Female ☐ | Height | Weight | Single ☐ | Married ☐ | No. of Dependents *(Excluding Self)* |
|---|---|---|---|---|---|---|---|---|---|
| | | | | | | | | | |

## Education

| | Name of School | Location of School | No. Yrs. | Graduated No | Graduated Yes | Mo. | Yr. | Degree Received | Major Subject |
|---|---|---|---|---|---|---|---|---|---|
| *Last* Grade or High School | | | | | | | | | |
| Business or Trade Schools | | | | | | | | | |
| Colleges or Universities | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |

## Previous Employment

List all employment, with *present or last job first.* Exclude military service. Include school vacation jobs where significant. If self-employed, state nature of business. Unless you note otherwise, the Company may contact all those listed. (For marine experience, note vessel's name, flag, owner; reciprocating, turbine, or diesel.)

| From Mo. | From Yr. | To Mo. | To Yr. | Approx. No. Hours Per Week | Name & Address of Employer | Nature of Job (or Marine Rating) & Supervisor's Name | Wage or Salary | Reason for Leaving |
|---|---|---|---|---|---|---|---|---|
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |

## Military Record

*List present or last service first.*

Draft Classification | Are you in the Reserves? ☐ Yes ☐ No | If "Yes," ☐ Commissioned ☐ Non-Commissioned

| From Mo. | From Yr. | To Mo. | To Yr. | Active Duty or Reserve? | Branch of Service | Rank/Rate | Specialization | Discharge Honorable | Discharge Other (Explain) |
|---|---|---|---|---|---|---|---|---|---|
| | | | | | | | | | |
| | | | | | | | | | |

An Equal Opportunity Employer

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**General Information**

1. a. List any physical limitations or chronic illnesses.

b. Are you receiving compensation for any injury, illness or disability? ☐ Yes ☐ No
If "Yes," describe and give per cent of rating, if any.

| 2. Foreign Languages You Speak Fluently | Read |
|---|---|
| | |

3. Licenses Held (Auto Driver, Truck Driver, Pilot, Marine, Radio, etc.)

4. Special or Occupational Skills (Typing, Shorthand, Machine Operator, etc.)

**Activities & Interests** Exclude any organization or society the name or character of which indicates the race, religious creed, color, national origin or ancestry of its members.

1. School Activities (Sports, Student Government, Honors, etc.)

2. Outside Interests (Hobbies, Community Activities, etc.)

**References**

1. List two references *other than* relatives, persons employed by this Company, and those for whom you have worked.

| Name & Address | Occupation | Years Known | Personal Friend | Business or Professional Acquaintance |
|---|---|---|---|---|
| a. | | | ☐ | ☐ |
| b. | | | ☐ | ☐ |

| 2. Relatives, Including Those by Marriage, Employed by This Company | | 3. Friends Employed by This Company | |
|---|---|---|---|
| Name | Relationship | Name | Years Known |
| a. | | a. | |
| b. | | b. | |

**Applicant Statement**

The information given is true and correct, and I understand that if I am employed, any misrepresentation, false statement, or omission of consequence herein, found by the Company at any time, will be sufficient cause to terminate my employment. I also authorize the Company (except as otherwise noted) to obtain from others, information believed by the Company to be pertinent to my employment.

Signature

**For Company Use**

| Date | Interviewed by | Remarks |
|---|---|---|
| | | |
| | | |
| | | |
| | | |

UNIT IV
CHAPTER 3
Activity 7

LEVI STRAUSS & CO.

# APPLICATION FOR EMPLOYMENT

SAMPLE COPY

(All information treated confidentially)

Date _____

Name (print) _____ Home Phone No. _____

Present Address _____ (Number Street City State Zip) How Long Have You Lived There? _____

Previous Address _____ (Number Street City State Zip) How Long Did You Live There? _____

Business Address _____ (Number Street City State Zip) Business Telephone No. _____

Social Security No. _____ Date of Birth _____ Height ___ ft. ___ in. Weight _____ lbs. Are you a citizen of the U.S.? Yes ☐ No ☐

Position applied for _____ Monthly Earnings Expected $ _____

Why are you applying for a position with Levi Strauss & Co.? _____

Who referred you to us? _____

Have you ever applied to, or been employed by, Levi Strauss? Yes ☐ No ☐ If so, When? _____ Where? _____

Name any Levi Strauss employees you know (indicate relationship, if any, and number of years known) _____

## EDUCATION

| Type of School | Name of School | Courses Majored In | No. of Years | Graduate? Degrees? | Last Year Attended |
|---|---|---|---|---|---|
| ELEMENTARY | | | | | |
| HIGH SCHOOL | | | | | |
| COLLEGE | | | | | |
| COLLEGE | | | | | |
| GRADUATE SCHOOL | | | | | |
| BUSINESS OR TRADE SCHOOL | | | | | |
| CORRESPONDENCE OR NIGHT SCHOOL | | | | | |

## JOBS WHILE IN SCHOOL

| Name of Employer | Your Job | Salary | Dates | | Hours Per Week |
|---|---|---|---|---|---|
| | | | From | To | |
| | | | | | |
| | | | | | |
| | | | | | |

Scholastic Standing in High School? _____ In College? _____

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UNIT IV
CHAPTER 3
Activity 7 Continued EXTRA CURRICULAR ACTIVITIES (Athletics, Clubs, etc.)
*(Omit Military, Racial, Religious, or Nationality Groups)*

In High School _____

Offices Held _____

In College _____

Offices Held _____

Principal source of spending money while in High School and College _____

## WORK HISTORY

**PRESENT (OR MOST RECENT) EMPLOYMENT:** From _____ (Month Year) To _____ (Month Year)

Name of Company _____ Kind of Business _____

Address _____ Telephone No. _____

How Was Job Obtained? _____ Monthly Salary: Start $ _____ Final $ _____

Nature of Work at Start _____ Nature of Work at Leaving _____ (State territory where worked)

Supervisory Positions Held _____ No. of People Supervised ____ Name & Title of Supervisor _____

Reason for Leaving (or considering leaving) _____

**NEXT MOST RECENT EMPLOYMENT:** From _____ (Month Year) To _____ (Month Year)

Name of Company _____ Kind of Business _____

Address _____ Telephone No. _____

How Was Job Obtained? _____ Monthly Salary: Start $ _____ Final $ _____

Nature of Work at Start _____ Nature of Work at Leaving _____ (State territory where worked)

Supervisory Positions Held _____ No. of People Supervised ____ Name & Title of Supervisor _____

Reason for Leaving _____

**NEXT MOST RECENT EMPLOYMENT:** From _____ (Month Year) To _____ (Month Year)

Name of Company _____ Kind of Business _____

Address _____ Telephone No. _____

How Was Job Obtained? _____ Monthly Salary: Start $ _____ Final $ _____

Nature of Work at Start _____ Nature of Work at Leaving _____ (State territory where worked)

Supervisory Positions Held _____ No. of People Supervised ____ Name & Title of Supervisor _____

Reason for Leaving _____

SELLING DIRECT TO HOME OR FARM Years ____ For what firms? _____

Lines sold _____

POINT-OF-SALE DISPLAY WORK Years ____ For what firms? _____

Lines covered _____

OTHER SELLING Years ____ For what firms? _____

Lines sold _____

## OTHER STATEMENTS

If employed, on what date would you be available for work? _____ Territory Preferred _____ Why _____

Any Geographical Restrictions? (U.S. only, Southeast, New York only, etc.)? _____

How much time per month could you spend traveling away from home? _____

Are there any other experiences, skills, or qualifications which you feel would especially fit you for work as a sales rep. with Levi Strauss & Co.?

_____

_____

_____

_____

What are your long range job objectives? _____

What other plans do you have for the future? _____

## PERSONAL

Condition of health: _____ No. of days missed from work due to illness in last two years: _____ Date and reason for last physical exam: _____

Describe any physical disabilities: _____

Describe any serious illnesses, operations, accidents, or nervous disorders (with approximate dates): _____

_____

Have you ever been convicted of a felony? If yes, please give date and explain: _____

Person to be notified in case of emergency _____ Relationship _____

Address _____ Telephone No. _____
City State Zip

## SERVICE IN U.S. ARMED FORCES

If Veteran, Branch of Service _____ Date Entered _____ Date Discharged _____

Highest Rank _____ Rank at Discharge _____ Type of Discharge _____

Nature of Duties _____ Special Training _____

Reserve Status _____ Is Reserve obligation active? _____ How many years left? _____

How often do you meet? _____ Do you go to summer camp? ____ Present Draft Classification _____ Ever Deferred? ____ Why? _____

I hereby authorize Levi Strauss & Co. to obtain – and each of my former employers and personal references to give – all information sought concerning me or my work habits or skills. I certify all statements made herein are correct.

Date _____ Signature _____

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## WORK HISTORY (cont.)

**NEXT MOST RECENT EMPLOYMENT:** From ____ (Month) ____ (Year) To ____ (Month) ____ (Year)

Name of Company _____ Kind of Business _____

Address _____ Telephone No. _____

How Was Job Obtained? _____ Monthly Salary: Start $ _____ Final $ _____

Nature of Work at Start _____ Nature of Work at Leaving _____ (State territory where worked)

Supervisory Positions Held _____ No. of People Supervised _____ Name & Title of Supervisor _____

Reason for Leaving _____

Explain any unemployment over 30 days _____

### REFERENCES
(Not Former Employers or Relatives)

| Name | Address and Phone Number | Years Known | Occupation |
|---|---|---|---|
| | | | |
| | | | |
| | | | |

### OUTSIDE ACTIVITIES
(List all activities participated in since leaving school. Omit military, racial, religious, or nationality groups.)

| Name of Organization | When did you actively participate? From | To | Offices Held |
|---|---|---|---|
| | | | |
| | | | |
| | | | |

### SALES EXPERIENCE
Please summarize specific sales experience below:

SELLING TO RETAILERS Years ____ For what firms? _____

Lines sold _____

SELLING IN RETAIL STORES Years ____ For what firms? _____

Lines sold _____

SELLING TO INSTITUTIONS OR INDUSTRIAL FIRMS Years ____ For what firms? _____

Lines sold _____

UNIT IV

# THE RESUME'

## CHAPTER 4

## RESUME'

A resume' is a short statement you would give or send to an employer. The resume' would tell that employer something about you. Those things you would want to tell them would be; who you are; what you know; what you have done; what kind of work you want; why you should be hired; and references. It should be neat, brief and without errors. Also it should be typed to look its best.

Read and study the following resumes' done by students like yourself.

# PERSONAL RESUME

of

DENISE TEMPLE

**PERSONAL INFORMATION:**

| | |
|---|---|
| Age: | 16 |
| Address: | 10913 Newcomb, Whittier, CA 90603 |
| Telephone: | 943-4895 |
| Health: | Excellent |
| Height and Weight: | 5'5", 110 pounds |
| Social Security Number: | 570-27-0987 |

**EDUCATION:**

| | |
|---|---|
| High School: | Lowell High School -will graduate June, 1977 |
| Major: | Secretarial |
| Grade Average: | 3.0 |
| Business Classes: | Shorthand I |

**WORK EXPERIENCE:**

| | |
|---|---|
| California Personnel and Guidance | Duties: Typing, operation of the 2400 Xerox machine and a mail machine, 10 key adding machine |

**ACTIVITIES:**

| | |
|---|---|
| Student of Modern Dance | I have practiced in modern dance for three years. It is a way of communicating without talking. |
| Church | I am active in my church |

**REFERENCES:**

| | |
|---|---|
| California Personnel and Guidance Association | Telephone 1-714-871-6460 |
| Mr. and Mrs. Garrand | 697-8804 |
| Mr. and Mrs. Veder | 869-8053 |

PERSONAL RESUME

OF

SUSAN BROWN

PERSONAL INFORMATION:

| | |
|---|---|
| Age: | 16 (May 24, 1956) |
| Address: | 1561 Hill Drive, Whittier, CA 90604 |
| Telephone: | (213) 493-1052 |
| Health: | Excellent |
| Height and Weight: | 5'6", 120 pounds |
| Social Security Number: | 516-20-8040 |

EDUCATION:

| | |
|---|---|
| High School: | Lowell High School-will graduate in June 1977 |
| Major: | College Prep (with the intention of working towards a law career) |
| Grade Average: | 3.7 |
| Academic Honors: | Scholastic Federation for three years, and have attended three Top 100 banquests |

WORK EXPERIENCE:

| | |
|---|---|
| Volunteer Salesgirl Gift Shop<br>Presbyterian Intercommunity Hospital<br>12401 East Washington Blvd.<br>Whittier, California 90602 | Duties: Selling, delivering gifts and flowers to patients, balancing accounts, training new girls, writing up specialized orders of Christmans cards, and helping with inventory. Many times, I have had the responsibility for the gift shop without additional assistance or supervision.<br>June, 1972 to present |

ACTIVITIES:

Student Body Office: In my freshman year, I held the office of Associate Justice on Lowell's Supreme Court. Its purpose was to review certain sections of the school constitution and rate their relevancy.

Music: I have participated in Lowell's marching band, concert band, pep band, and orchestra. I was also in the Cavaliers Youth Band for two years.

Hi-Jinx: Hi-Jinx is a performance of girls singing and dancing to music which is related to a basic theme. I have been active in Hi-Jinx two years, being leader of my group one year.

Sports: I have been a member of the girl's tennis team at Lowell for two years, working my way into a varsity position both years. In addition, I was on the Lowell girl's swim team for one year.

REFERENCES (by permission)

Mr. Marc Brown
5015 Express Drive
Magic Hills, CA 92653
(714) 380-4135
Occupation: Plant Operating Assistant
Pacific Telephone
Newport Beach, CA

Mr. Duane Clizbe
c/o Lowell High School
P.O. Box 171
16200 Amber Valley Drive
Whittier, CA 90604
(213) 043-3715
Occupation: Assistant Principal
Lowell High School
La Habra, CA

Mr. Walter James
6070 Caribou
Mt. Valley, CA
(714) 315-9072
Occupation: Head Programming Advanced Systems
Hughes Aircraft Company
El Segundo, CA.

## YOUR RESUME

Now that you have had a chance to see what resume writing is all about it is your turn to try writing one. Below is the bare outline of a resume form. Practice on this form first then try one on your own.

RESUME OF_____

Address:

Age:

Height:

Weight:

Health:

Skills:

Education:

| Schools Attended | Address |
|---|---|

Work Experience:

| Position | Employer | Address of Employer Street, City, Zip |
|---|---|---|

Other Interests and Hobbies:

Membership in Clubs/Organizations:

References:

| Name | Address |
|---|---|
| 1. | |
| 2. | |
| 3. | |

Now rewrite or type your resume as nicely as possible.

UNIT IV
Post-Test

| POSITION APPLIED FOR | | | | DATE | |
|---|---|---|---|---|---|
| NAME IN FULL MR. MRS. MISS | LAST | FIRST | MIDDLE | MAIDEN NAME | SOC. SEC. NO. |
| NUMBER AND STREET | | CITY | STATE | ZIP | TELEPHONE NO. |
| MARITAL STATUS ☐ SINGLE ☐ MARRIED ☐ SEPARATED ☐ WIDOWED ☐ DIVORCED | | | DATE OF BIRTH MO. DAY YR. | | PLACE OF BIRTH |
| IN CASE OF EMERGENCY NOTIFY | NAME | | | | RELATIONSHIP |
| | ADDRESS | | | | TELEPHONE NO. |
| HEIGHT | WEIGHT | WEAR GLASSES ☐ YES ☐ NO | HANDED ☐ LEFT ☐ RIGHT | ANY PHYSICAL DEFECTS ☐ YES ☐ NO | EXPLAIN |

## EDUCATION

| TYPE OF SCHOOL | NAME AND ADDRESS | YRS. ATTENDED | YEAR LEFT | GRADUATED | COURSE OR MAJOR |
|---|---|---|---|---|---|
| GRAMMAR OR GRADE | | | | | |
| HIGH SCHOOL | | | | | |
| COLLEGE | | | | | |
| BUSINESS OR TRADE | | | | | |

## MILITARY EXPERIENCE

| BRANCH OF SERVICE | DISCHARGE DATE AND RANK | DRAFT CLASSIFICATION | TYPE OF DISCHARGE |
|---|---|---|---|
| | | | |

## SKILLS

| WHAT KIND OF WORK CAN YOU DO | TYPING SPEED |
|---|---|
| WHAT MACHINES CAN YOU OPERATE | SHORTHAND SPEED |

## PRIOR WORK HISTORY

LIST IN ORDER, LAST OR PRESENT EMPLOYER FIRST — MAY WE CALL YOUR PRESENT EMPLOYER ☐ YES ☐ NO

| DATES FROM | DATES TO | EMPLOYER | RATE OF PAY START | RATE OF PAY FINISH | JOB TITLE AND SUPERVISOR'S NAME | REASON FOR LEAVING |
|---|---|---|---|---|---|---|
| | | NAME | | | | |
| | | ADDRESS | | | | |
| | | NAME | | | | |
| | | ADDRESS | | | | |

## REFERENCES (Other than Relatives or Former Employers)

| | NAME | ADDRESS | OCCUPATION |
|---|---|---|---|
| 1. | | | |
| 2. | | | |

IT IS AGREED AND UNDERSTOOD THAT ANY FALSE STATEMENTS ON THIS APPLICATION MAY BE CONSIDERED SUFFICIENT CAUSE FOR DISMISSAL, WHEN DISCOVERED.

SIGNATURE_____

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